## A.D. 2.18, Critical Incident Stress Response Program Prepared for signature 8/31/99 - effective 10/12/99

- <u>Policy</u>. The Department shall provide a Critical Incident Stress Response Program (CISRP) for staff who have been adversely affected, either directly or indirectly, by a critical incident related to Department employment.
- 2. Authority and Reference.
  - A. Connecticut General Statutes, Section 18-81.
  - B. American Correctional Association, Standards for Adult Community Residential Services Third Edition, 1995, Standard 3-ACRS-1C-20.
  - C. American Correctional Association, Standards for Adult Correctional Institutions, Third Edition, January 1990, Standard 3-4069.
  - D. American Correctional Association, Standards for Administration of Correctional Agencies, Second Edition, April 1993, Standard 2-CO-1C-25.
  - E. American Correctional Association, Standards for Adult Probation and Parole Field Services, Third Edition, August 1998, Standard 3-3069.
  - F. American Correctional Association, Standards for Correctional Training Academies, May 1993, Standard 1-CTA-1C-13.
  - G. Administrative Directive 6.6, Reporting of Incidents.
- 3. <u>Definitions</u>. For the purposes stated herein, the following definitions apply:
  - A. <u>Critical Incident</u>. A significant event that has the potential to cause psychological distress in an individual and may interfere with the person's ability to function either at the time of the event or later.
  - B. <u>Critical Incident Stress Response Team (CISRT)</u>. Specially trained Department staff members who defuse and debrief affected staff following a critical incident.
  - C. <u>Debriefing</u>. An encounter between affected staff and a Critical Incident Stress Response Team (CISRT) member(s) designed to offer support and allow the employee to articulate the facts and feelings surrounding the critical event.
  - D. <u>Defusing</u>. A process during and/or immediately following a critical incident that addresses the emotional and physical needs of affected staff.
  - E. <u>Intervention</u>. Any contact between a CISRT member and an affected employee to assess delayed stress-related symptoms, offer continued support, and encourage emotional resolution.
- 4. <u>Organization and Responsibilities</u>. The Deputy Commissioner of Programs shall be responsible for the CISRP and shall appoint: (1) a CISRP Coordinator who shall administer all related activities; and (2) an advisory committee.
  - A. <u>Critical Incident Stress Response Program Coordinator</u>. The CISRP Coordinator shall: (1) recruit, select, supervise, and ensure the proper training of all CISRP staff; (2) ensure each unit emergency plan includes a current list identifying the Program Coordinator, Team members and respective telephone numbers; (3) respond to all requests for CISRT interventions; and (4) coordinate, assign and dispatch CISRT members in adequate number to assist staff during and/or following a critical incident.
  - B. <u>Critical Incident Stress Response Team(s)</u>. A CISRT shall be comprised of up to five (5) persons and shall include a team leader, a member of the clergy as appropriate, and peer support personnel as appropriate. Each team member shall be specially

trained prior to any involvement in the Program. Upon activation, a CISRT leader or member shall: (1) follow the direction of the CISRP Coordinator and/or the team leader; (2) conduct individual and group defusing and debriefing sessions with affected staff as assigned; (3) identify and refer affected employees to support services as appropriate; and (4) complete appropriate documentation, maintaining proper confidentiality in accordance with Section 10 below.

- 5. <u>Classification of Incidents</u>. Each critical incident shall be classified as a mandatory or discretionary referral, contingent upon the number of staff affected, severity of the event and/or magnitude of the agency response.
  - A. <u>Mandatory Referral</u>. Mandatory referral shall include, but not be limited to, the following: (1) riot; (2) hostage situation; (3) staff death on post; (4) staff suicide; (5) large-scale destruction or disaster; (6) witnessing inmate suicide or violent death; (7) serious staff assault requiring emergency medical care outside the facility; and (8) sexual assault on an employee.
  - B. <u>Discretionary Referral</u>. Discretionary referral shall include, but not be limited to, the following: (1) inmate disturbance; (2) staff assault not requiring outside medical treatment; (3) fire; (4) threat; and (5) occupational exposure.

Each such critical incident shall be reported in accordance with Administrative Directive 6.6, Reporting of Incidents. A copy of form CN 6601, Incident Report, shall be forwarded to the CISRP Coordinator by the Unit Administrator.

- 6. <u>Identification and Activation</u>. Each Unit Administrator shall ensure the immediate notification of the CISRP Coordinator when any event may qualify as a Critical Incident. The Unit Administrator (or designee) and the CISRP Coordinator shall classify the incident, identify team members and logistical accommodations required, and activate the team. Activated Correctional Emergency Response Team members, and other Department staff shall also be considered for CISRP services as appropriate.
- 7. <u>Defusing</u>. The CISRP Coordinator shall assemble the CISRT(s) to conduct an intervention session with affected employees as appropriate. An intervention for staff involved in mandatory referral incident shall take place during or immediately following the incident and discretionary referral defusing services shall be at the judgement of the CISRP Coordinator in consultation with the Unit Administrator. The Unit Administrator in consultation with the CISRT shall provide for any necessary personal accommodations such as showers, clothing, rest, telephone calls or other needs for affected staff.
- 8. <u>Debriefing and Intervention</u>. An initial debriefing session shall normally occur within two (2) to four (4) days of the incident. In addition to duties stated herein, the CISRP Coordinator shall:
  - A. Refer an affected staff member to the Employee Assistance Program (EAP) following defusing and debriefing whenever it is determined the employee requires more extensive and extended assistance.
  - B. Notify the Unit Administrator when it is believed that a particular employee is unable to return to normal duties.
  - C. Determine the necessity for a follow-up intervention which shall normally occur within 60 days of the event.
- 9. <u>Availability of Affected Staff and CISRP Members</u>. The CISRP Coordinator shall notify each appropriate Unit Administrator when staff are required for CISRP activities. Each Unit Administrator shall work with the CISRT Coordinator to ensure activated CISRT members and affected staff are

made available and remain available so long as required for CISRP activities. Defusing, debriefing and intervention shall be scheduled during normal work hours whenever possible and shall count as regular work time. Overtime and compensatory time may apply in accordance with the employee's job classification, contract provision or state regulations. The employee's facility shall be responsible to provide any overtime or compensatory time after receiving a written explanation from the Program Coordinator.

- 10. Confidentiality. Individual confidentiality shall be maintained for all information gained or shared during any CISRP defusing, debriefing or intervention; except that, when a direct and immediate threat to the safety and security of the work place or any individual exists, a confidential referral shall be made to the Unit Administrator and/or Employee Assistance Program Coordinator.
- 11. <u>Exceptions</u>. Any exception to the procedures in this Administrative Directive shall require prior written approval from the Commissioner.